

FILE FOLDER

DESCRIPTION ON TAB:

2d Rad BN

2d FSSG

- Outside/inside of actual folder did not contain hand written information**
- Outside/inside of actual folder did contain hand written information**
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6240
NREAD
MAR 18 1987

From: Commanding General, Marine Corps Base, Camp Lejeune
To: Commanding General, 2d Force Service Support Group, Marine Corps Base, Camp Lejeune

Subj: HAZARDOUS WASTE MANAGEMENT COMPLIANCE INSPECTIONS; RESULTS OF

Ref: (a) BO 6240.5
(b) CG MCB 2916252 Oct 86

Encl: (1) Hazardous Waste Management Compliance Inspection Report for 2d LOGSPTBN, 2d FSSG of 2 Mar 87
(2) Hazardous Waste Management Compliance Inspection Report for 2d FORECONCO, 2d FSSG of 3 Mar 87
(3) Hazardous Waste Management Compliance Inspection Report for 2d ANGLICO, 2d FSSG of 3 Mar 87
(4) Hazardous Waste Management Compliance Inspection Report for 2d RADDN, 2d FSSG of 5 Mar 87

1. The subject inspections were conducted by Base environmental personnel in accordance with references (a) and (b). Enclosures (1) through (4) provide findings, recommendations and supporting information relative to the subject inspections. It should be noted that discrepancies cited in enclosures (1) & (4) are violations of Environmental Protection Agency regulations described in reference (a).

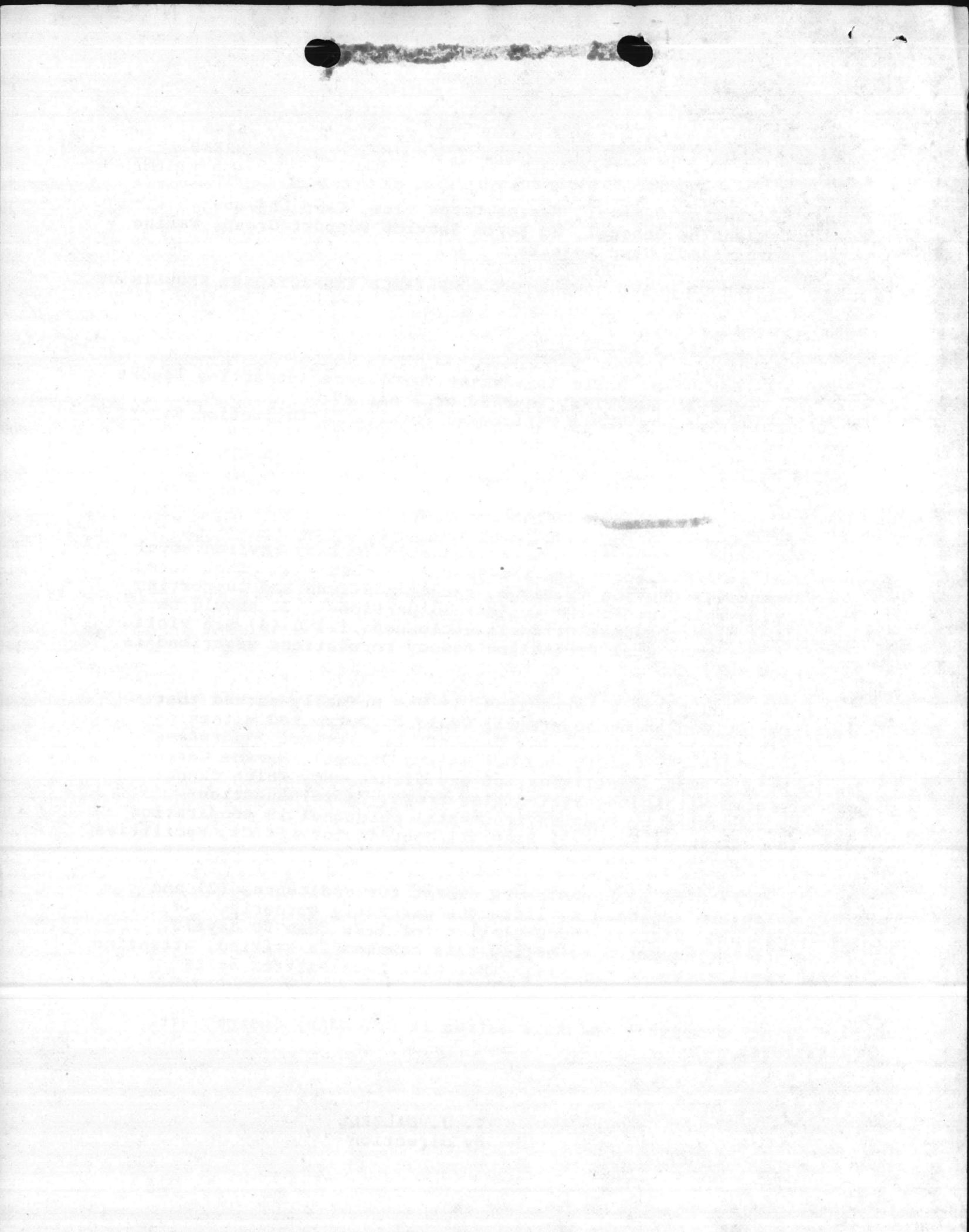
2. During the subject inspection, it was mutually agreed that violations cited in enclosure (1) would be corrected within fifteen calendar days from the date of this letter. Addressee should immediately notify the Commanding General, Marine Corps Base, Attn: AC/S, Facilities, of any discrepancy which cannot be corrected within the stated time frame. A reinspection will be conducted by Base environmental personnel in cooperation with the Hazardous Material Disposal Coordinator (HMDC), Facilities and Safety, G-4, 2d FSSG.

3. Appendix B of each enclosure except for enclosures (2) and (3), which are appendix A, lists the currently authorized HW generation and storage (accumulation for less than 90 days). Addressee is requested to notify this command in writing, attention AC/S, Facilities, of any sites that have been omitted or if there are additional sites required.

4. Point of contact for this matter is Mr. Danny Sharpe, ext. 2083/1690.

T. J. DALZELL
By direction

Encl



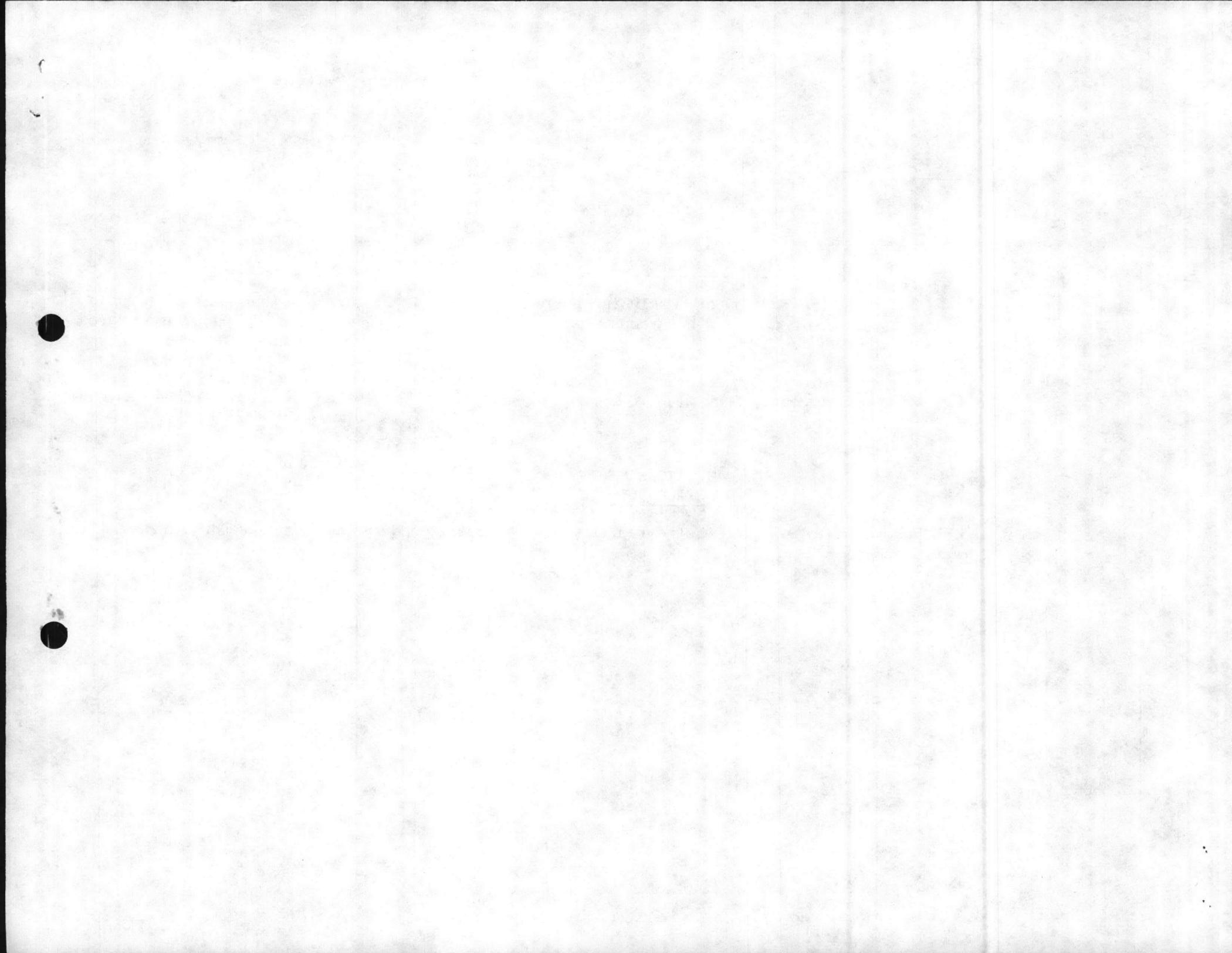
ORGANIZATION:

2d FSSG
2d RADBN

INSPECTION DATE: 5 March 1987

INSPECTOR'S NAME Sammy Gwynn

NO.	SPECIFIC LOCATION	DISCREPANCY	REF	RECOMMENDED CORRECTIVE ACTION
1.		<p style="text-align: center;"><u>MOTOR TRANSPORT</u></p> <p>a. Bldg. #FC-241 Failure to conduct weekly inspections and maintain a log of hazardous waste sites.</p> <p>b. Bldg. #FC-241 Failure to complete and post hazardous waste spill contingency plan.</p>		
2.		<p style="text-align: center;"><u>COMMUNICATIONS SHOP</u> <u>Bldg. #FC-365</u></p> <p>COMMENT: For the purpose of this inspection, the facility will be considered in compliance with hazardous waste regulations.</p>		



REFERENCES:

1. BO 6240.5 para 4.a(5) provide weekly inspections of all areas used to store hazardous waste and take action required to prevent and correct leaks, spills and other discrepancies. Maintain a log of those inspections.

2. CG ltr 6240 NREAD of 10 Nov 86. Provided by 6240 NREAD 20 Nov 86 requires the posting and development of site specific hazardous waste spill responsibilities prevention and related guidance.



10-10-10

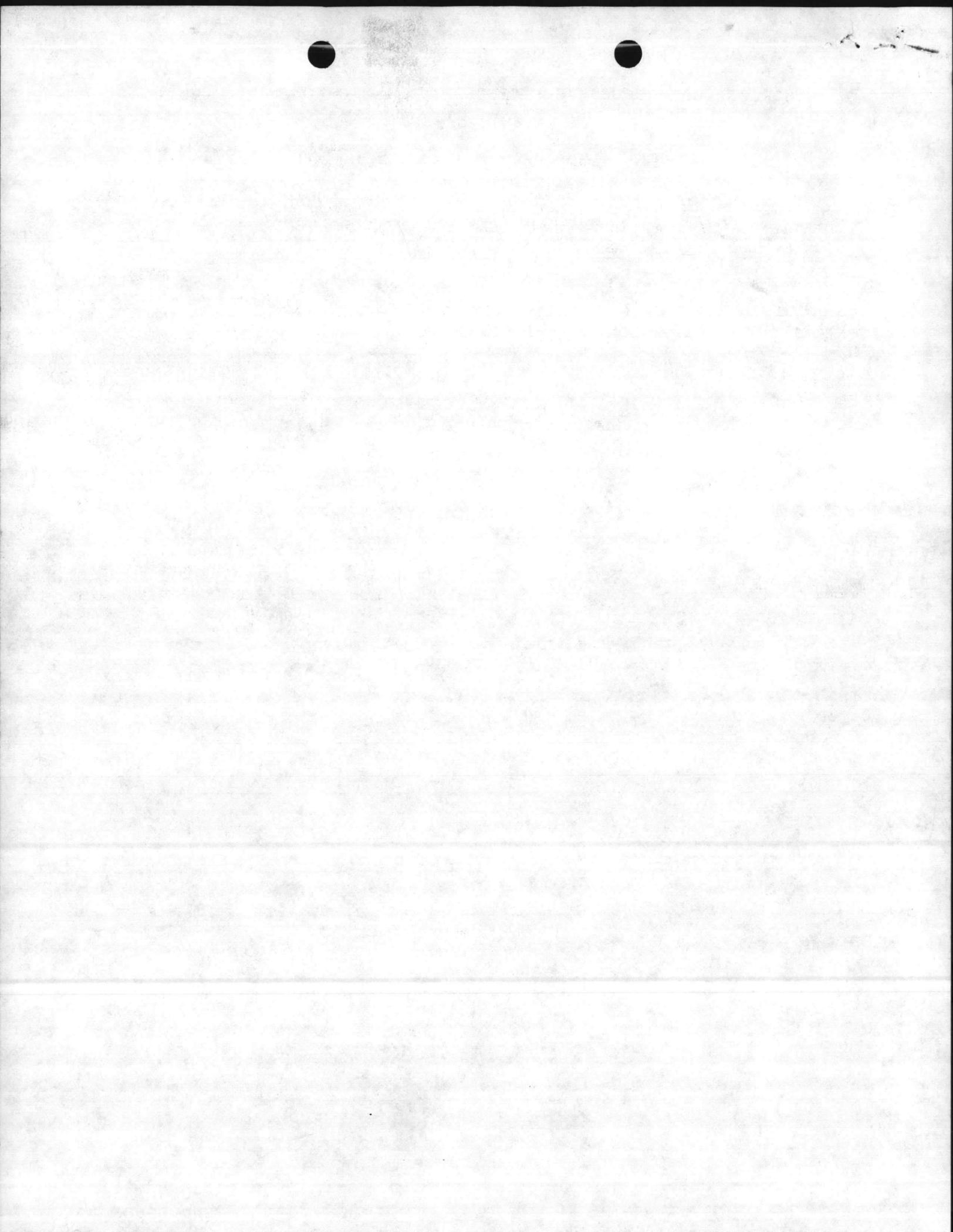
AUTHORIZED HAZARDOUS WASTE GENERATION & STORAGE SITES FOR
2d RADBN, 2d FSSG

SITE NO. 1
GENERATION/ACCUMULATION

BLDG. #FC-241, Motor Transport
DRY CLEANING SOLVENT

SITE NO. 2
GENERATION/ACCUMULATION

BLDG. #FC-365, Communications Shop
LITHIUM BATTERIES



HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 5 MARCH 87

1. Facility being Inspected: 2d Radio BN Motor Transport FC-241
2. Organization in Charge: 2d FSSG
3. Inspection Participants/Phone Number: SySGT Major (Sain)
Cpl Mc Allister (alt) Capt Baker (alt)
4. Description of HW Streams: Dry Cleaning Solvent p. 2580,
E. Techolyte + pol. Area floor no. 1018

5. Are records of HW generation consistent with HW streams? yes

6. HW Training

a. Are job descriptions available for all personnel actively involved in HW management? yes

b. Are training records adequate/current? yes

c. Are alternate personnel assigned to key positions? yes
(If not, explain how unit deals with absence of key personnel)

d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements yes
- (2) Applicable Base Orders yes
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections Partial
- (7) HW Turn-in Procedures yes
- (8) Health and Safety yes
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties yes

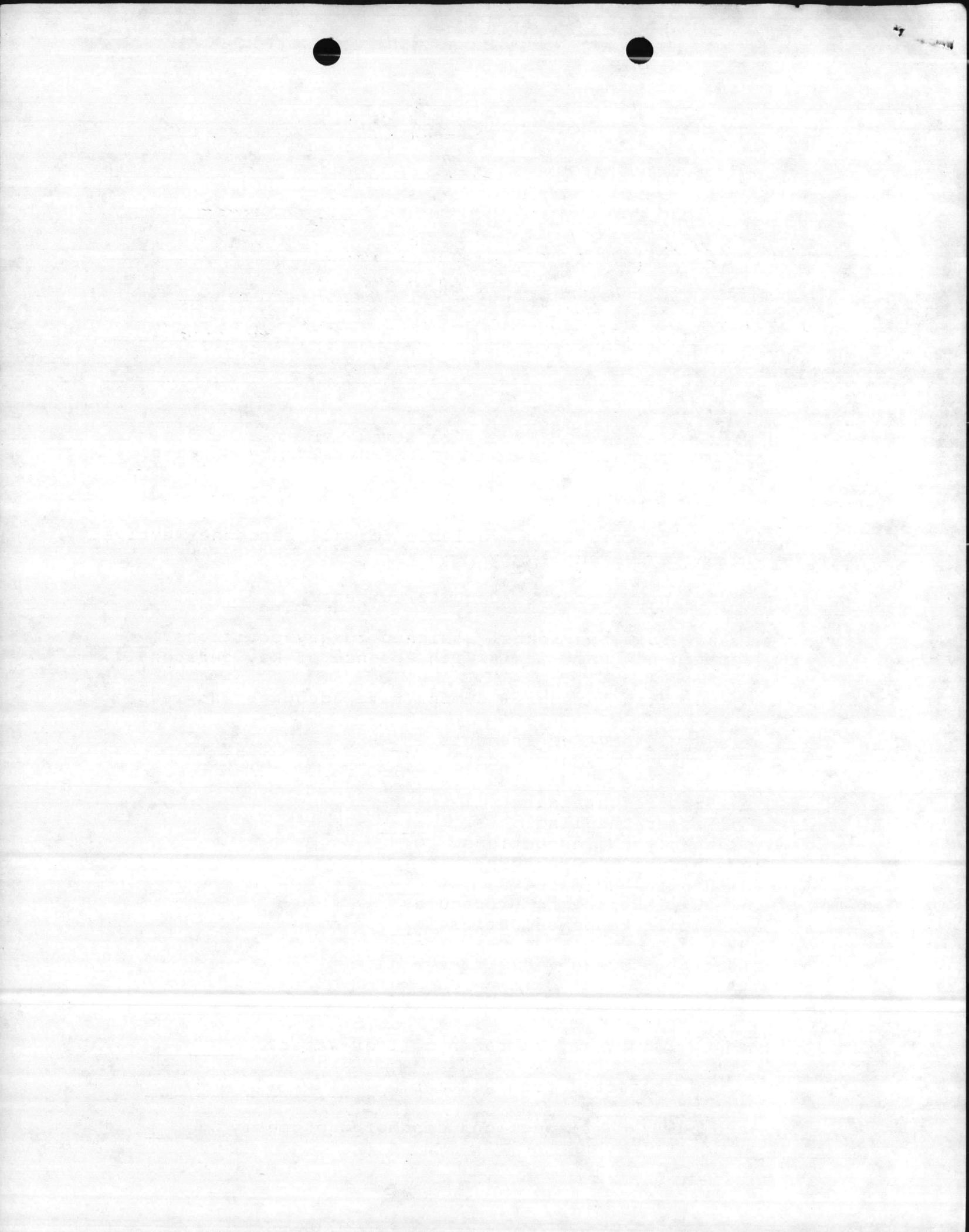
7. Condition of Storage Facilities

a. Date of last Fire Dept Inspection? _____

b. Are spills likely to reach soil or water? yes

c. Are HW protected from weather? NO

d. Are weekly HW inspections conducted properly? yes



e. Are discrepancies corrected promptly? yes

f. Condition of containers? ("X" indicates discrepancy)

- | | | | |
|----------------|-------|--------------------------------|-------|
| (1) Closed | _____ | (7) Properly Labeled | _____ |
| (2) Leaking | _____ | (8) Properly Dated | _____ |
| (3) Bulging | _____ | (9) Properly Stacked | _____ |
| (4) Collapsed | _____ | (10) Properly Packaged | _____ |
| (5) Corroded | _____ | (11) Meet DOT Requirements for | _____ |
| (6) Overfilled | _____ | Contents | _____ |

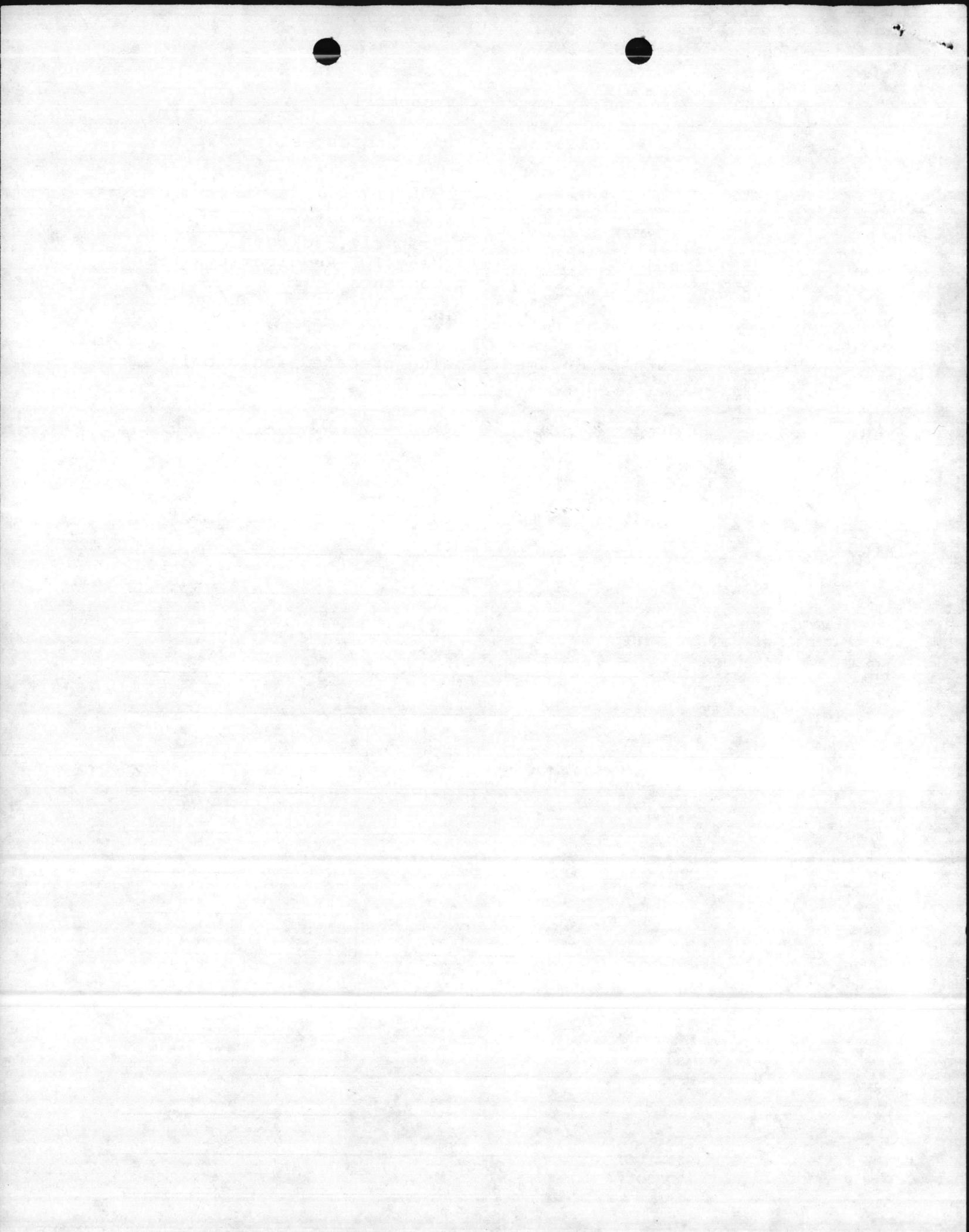
g. Are 90 day turn-in deadlines being met? yes

h. Are HW turn-in documents being prepared and submitted in a timely, proper manner? yes

i. Comments: Missing two weeks of inspection in

December of 1985,

Contingency plan was not filled out



INSPECTION FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

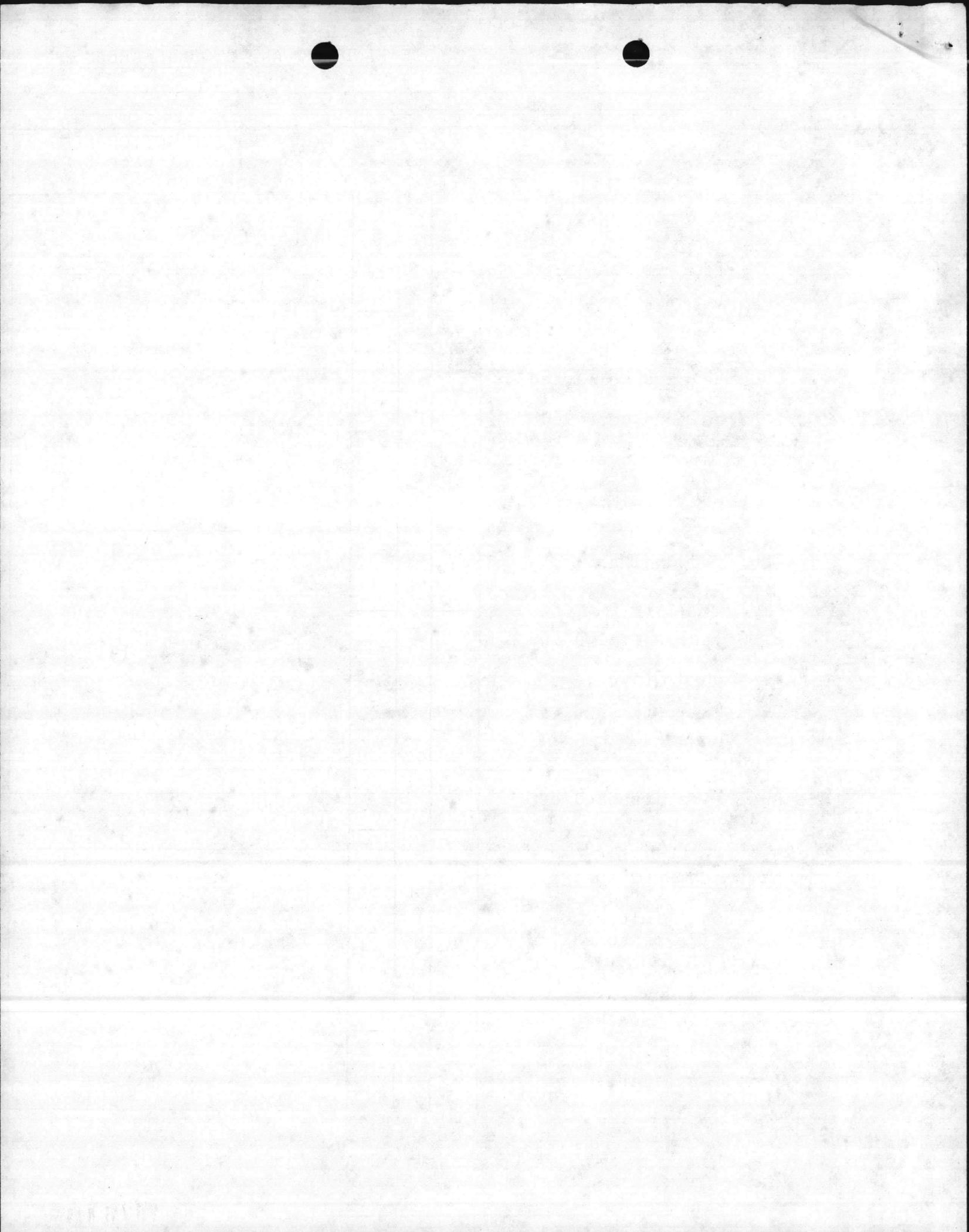
Name of Facility: _____

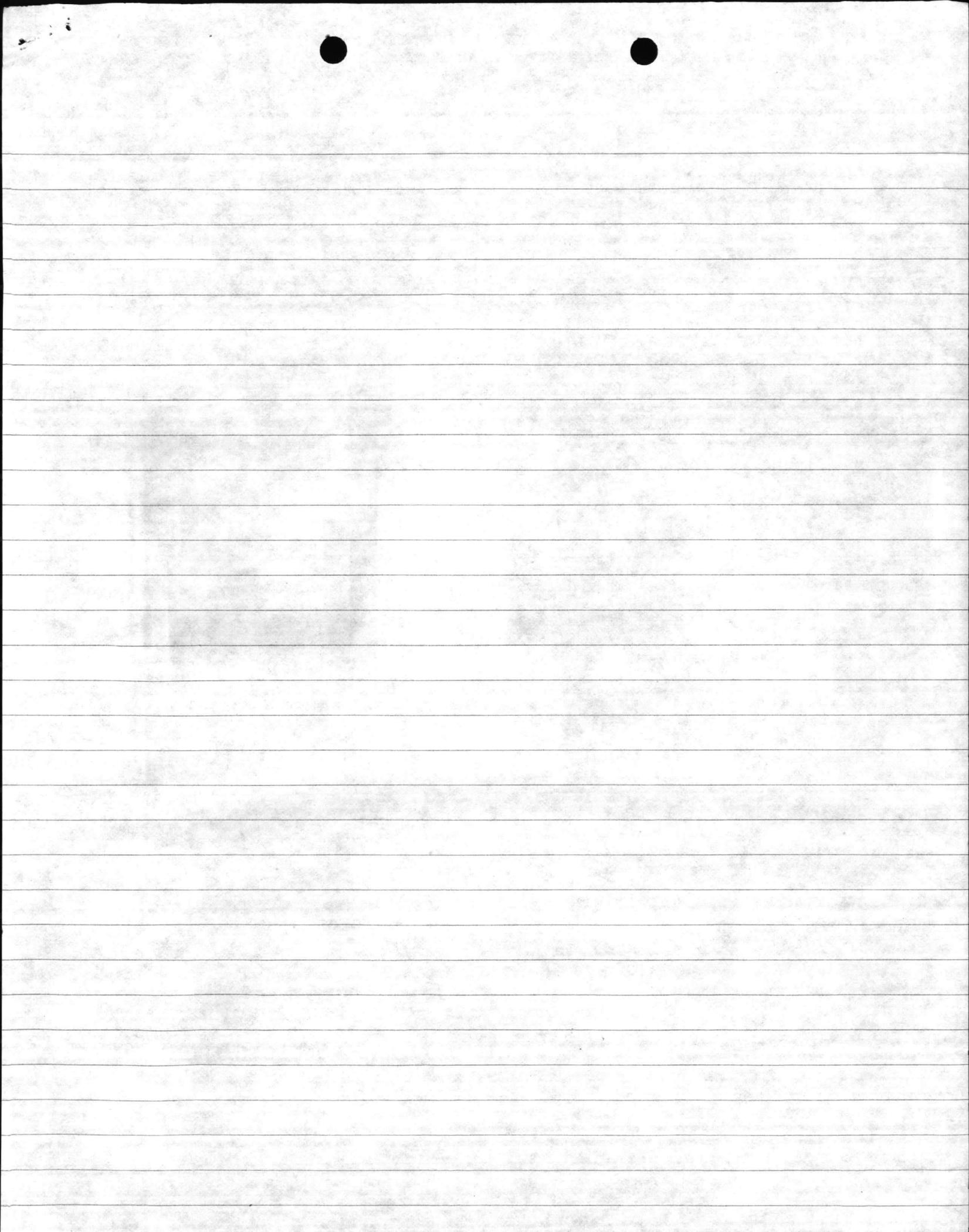
Name/Title OIC: _____

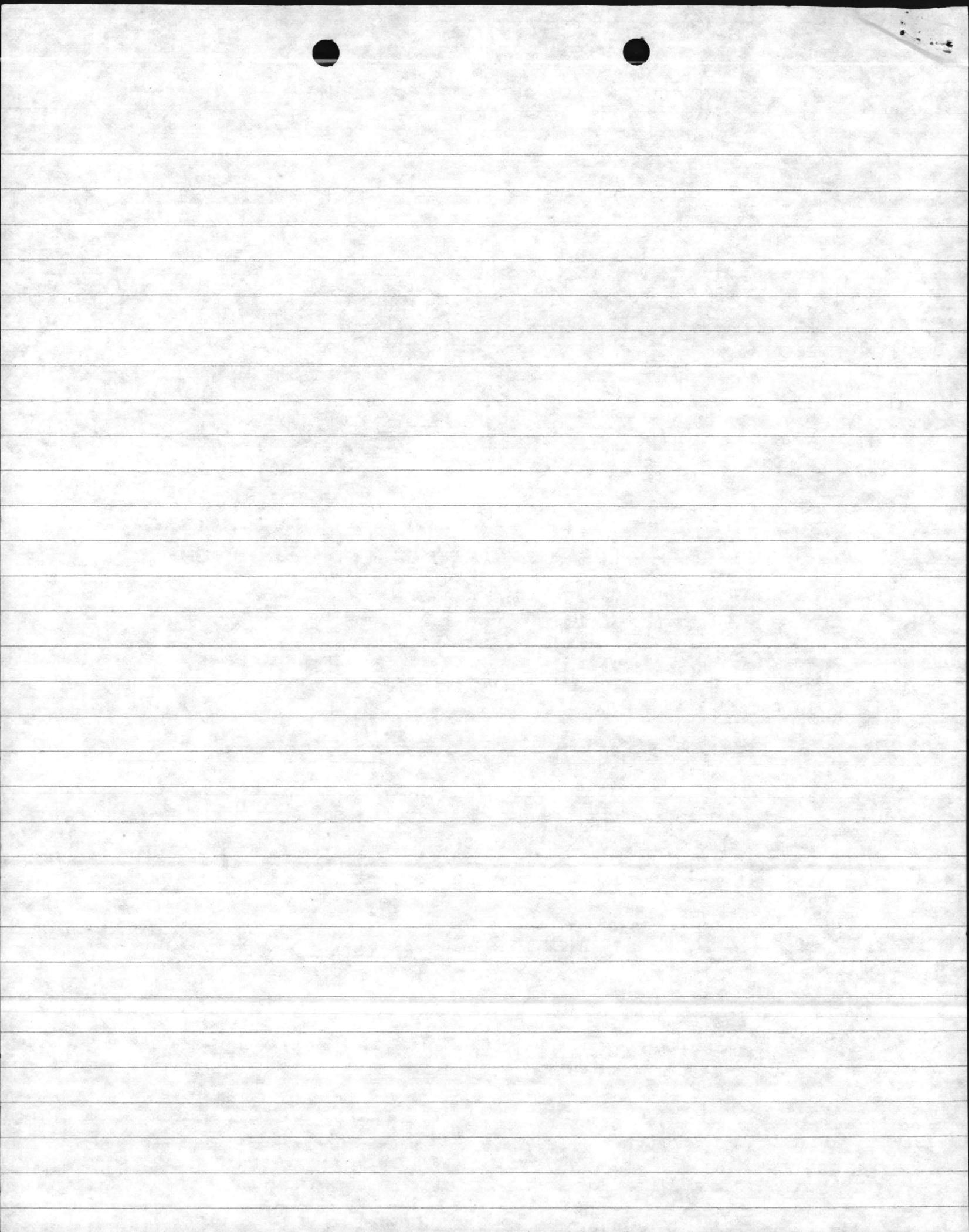
AREA OF CONCERN	YES		NO	CORRECTIVE ACTION NEEDED (use back of page to log action taken)
<p><u>A. CONDITION OF CONTAINERS</u></p> <p>1. Are containers closed</p> <p>2. Are containers leaking</p> <p>3. Are containers bulging</p> <p>4. Are containers collapsed</p> <p>5. Are containers corroded</p> <p>6. Are containers over-filled</p> <p>7. Other problems present</p>				
<p><u>B. LABELING AND MARKING</u></p> <p>1. Are HW labels in place</p> <p>2. Are HW labels filled out</p> <p>3. Are hazards (i.e., flammable, corrosive, etc.) labels or markings adequate</p>				
<p><u>C. Are HWs being disposed of by deadlines</u></p>				
<p><u>D. SECURITY AND EMERGENCIES</u></p> <p>1. Is access limited to authorized personnel only</p> <p>2. Is emergency response information posted</p> <p>3. Supplies and equipment readily available</p>				

DATE: _____

SIGNATURE: _____







HAZARDOUS WASTE (HW) MANAGEMENT INSPECTION FORM

Date: 5 MARCH 87

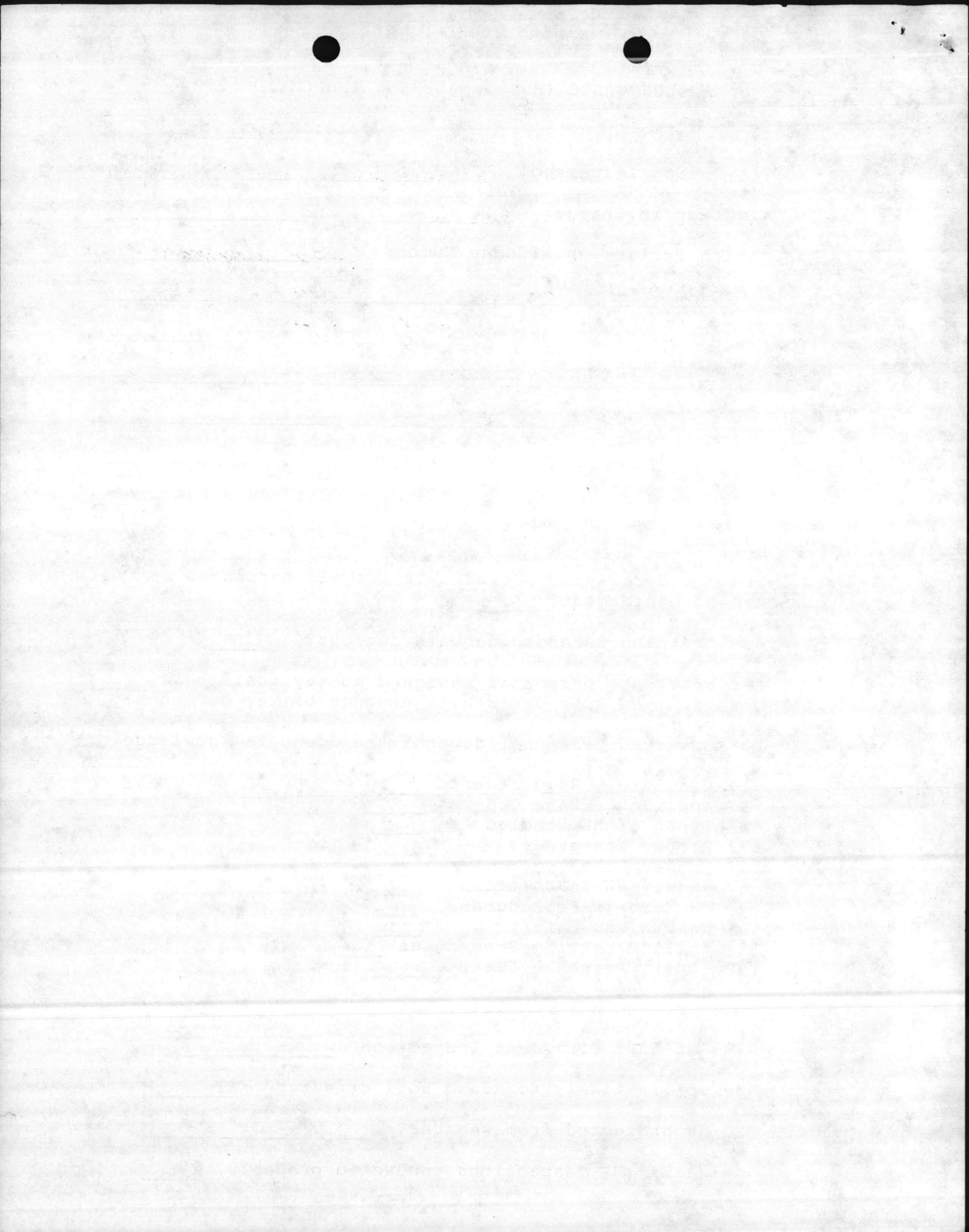
1. Facility being Inspected: 2d Radio BN Communication Shop
2. Organization in Charge: 2d FSSG
3. Inspection Participants/Phone Number: SSgt Sherman (Pim)
1 CPL R. L. ZERN (alt) phone no. 5114 Bldg FC-365
4. Description of HW Streams: Lithium Batteries

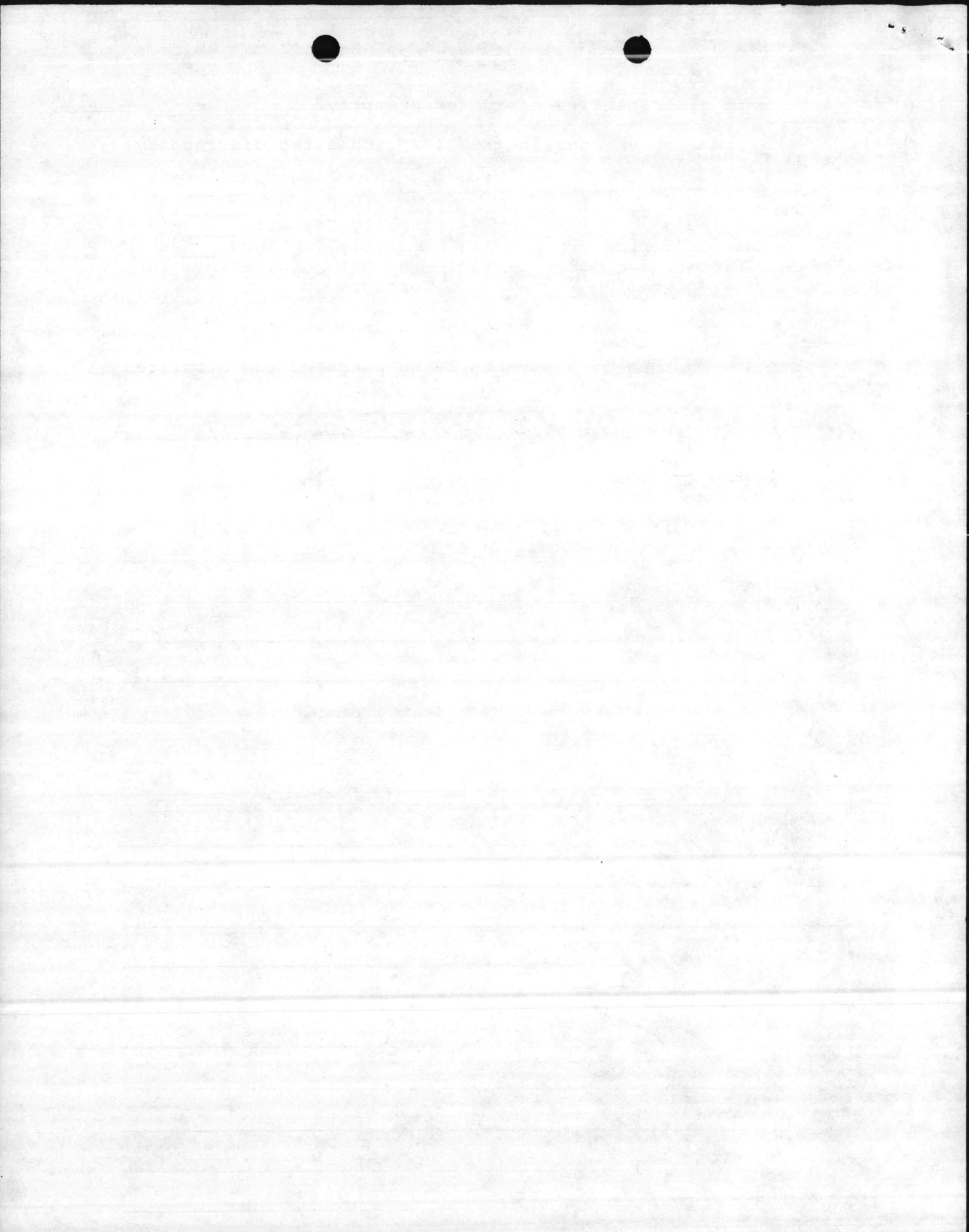
5. Are records of HW generation consistent with HW streams? yes

6. HW Training
- a. Are job descriptions available for all personnel actively involved in HW management? yes
 - b. Are training records adequate/current? yes
 - c. Are alternate personnel assigned to key positions? yes
(If not, explain how unit deals with absence of key personnel)
 - d. Do contacted personnel demonstrate adequate knowledge of:

- (1) Regulatory Requirements yes
- (2) Applicable Base Orders yes
- (3) Types of HW Handled yes
- (4) Proper Containers yes
- (5) Proper Labeling yes
- (6) Weekly HW Inspections yes
- (7) HW Turn-in Procedures yes
- (8) Health and Safety yes
- (9) Spill Reporting Procedures yes
- (10) Spill Response Duties yes

7. Condition of Storage Facilities
- a. Date of last Fire Dept Inspection? _____
 - b. Are spills likely to reach soil or water? no
 - c. Are HW protected from weather? yes
 - d. Are weekly HW inspections conducted properly? yes





INSPECTION FORM FOR HAZARDOUS WASTE HANDLING AND STORAGE AREAS

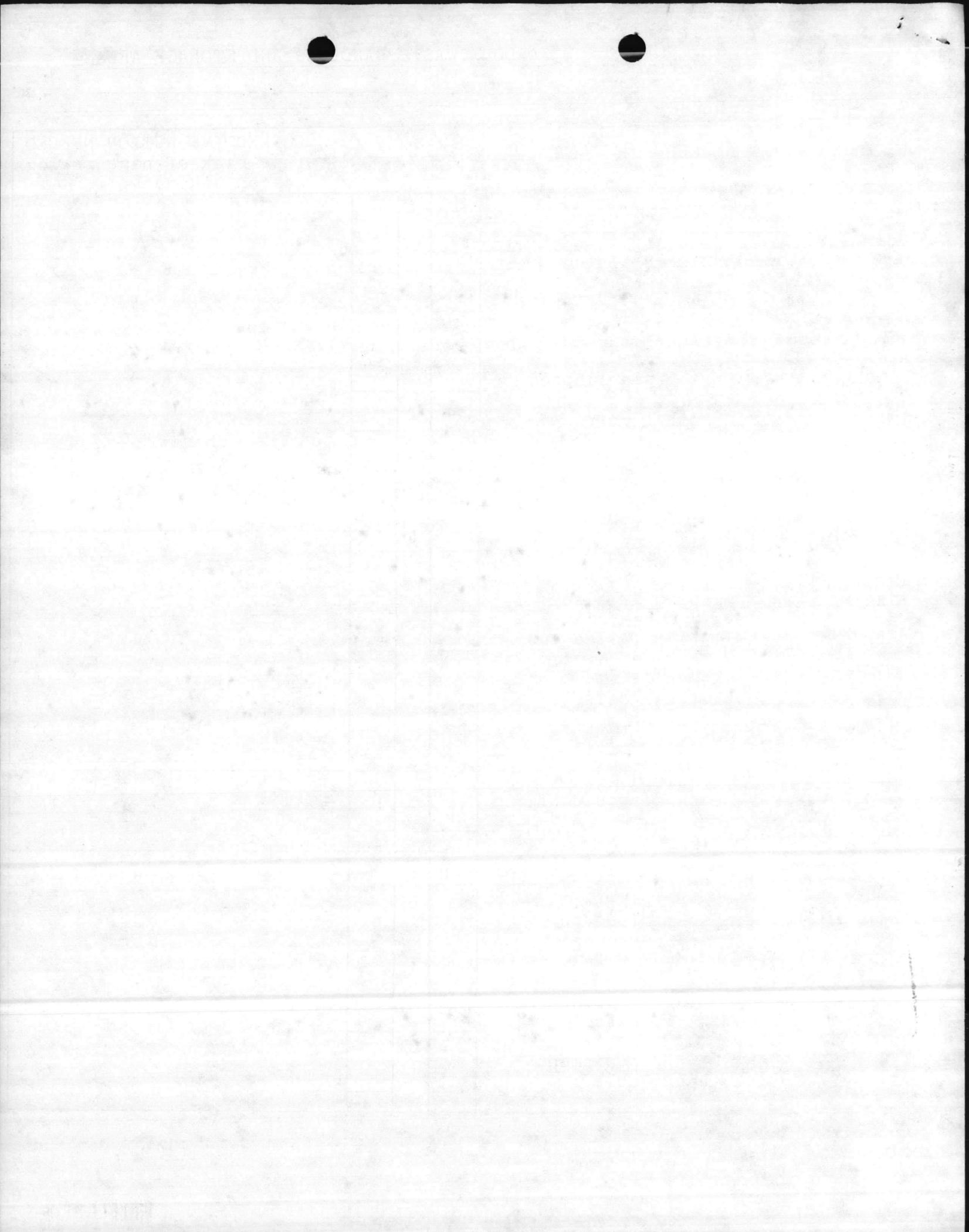
Name of Facility: _____

Name/Title OIC: _____

AREA OF CONCERN	YES		NO	CORRECTIVE ACTION NEEDED (use back of page to log action taken)
<p><u>A. CONDITION OF CONTAINERS</u></p> <p>1. Are containers closed</p> <p>2. Are containers leaking</p> <p>3. Are containers bulging</p> <p>4. Are containers collapsed</p> <p>5. Are containers corroded</p> <p>6. Are containers over-filled</p> <p>7. Other problems present</p>				
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DATE: _____

SIGNATURE: _____







3